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| F           | ill in this inforn   | nation to id                    | entify             | your case:   |             |                      | 1 - 26 (1. 2 ) | . •_        |                          |
|-------------|--|---------------------------------|--------------------|--|-------------|----------------------|----------------|-------------|--------------------------|
|             | Debtor 1   | Mikole Rivera                   |                    |  | l .         | Check if this is:    |                |             |                          |
|             | Debior 1   | First Name                      |                    |  | st Name     | <u>Ø</u>             | <del>-</del>   |             |                          |
|             | Debtor 2<br>(Spouse, if filing)  | First Name                      |                    | Middle Name Las  | st Name     |                      |                | ng date:    | is of the                |
|             | United States Bank   | ruptcy Court fo                 | r the:             | EASTERN DIST. OF PI  | ENNSYLVANIA |                      | MM / D         | D / YYYY    | <u> </u>                 |
|             | Case number<br>(if known)  | 19-17263N                       |                    |  |             |                      | IVIIVI / D     | .57 1111    |                          |
| Of          | ficial Form 10   | )6J                             |                    |  |             | J                    |                |             |                          |
|             | chedule J: Yo  |                                 | ises               |  |             |                      |                |             | 12/15                    |
| cor<br>nar  | rect information. I  | f more space                    | is need<br>Answe   |  |             |                      |                |             |                          |
| 1.          | Is this a joint cas  |                                 |                    |  |             |                      |                |             |                          |
| 2.          | ✓ No. Go to line 2.  ✓ Yes. Does Debtor 2 live in a separate household?  ✓ No  ✓ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household?  Do you have dependents?  ✓ Yes. Fill out this information  Dependent's relation |                                 |                    |  |             |                      |                | Dependent's | Does dependent           |
|             | Debtor 2.  | i and                           | — fo               | for each dependent   | Grand Son   | Debtor 1 or Debtor 2 |                | age<br>3    | _ live with you?<br>☐ No |
|             | Do not state the d names.  | ependents'                      |                    |  | Grand 3011  |                      |                |             | Yes No Yes               |
|             |  |                                 |                    |  |             |                      |                |             | No Yes No                |
|             |  |                                 |                    |  |             |                      |                |             | Yes No Yes               |
| 3.          | Do your expense expenses of peopyourself and you   | ple other than                  | ?                  | ✓ No<br>☐ Yes  |             |                      |                |             |                          |
| Р           | art 2: Estima  | ate Your Or                     | ngoing             | g Monthly Expenses   |             |                      |                |             |                          |
| Est<br>to r | imate your expens  | es as of your<br>of a date afte | bankru<br>r the ba | ptcy filing date unless your control of this ankruptcy is filed. If this | -           |                      |                | -           |                          |
|             |  |                                 |                    | overnment assistance if chedule I: Your Income (                         |             |                      |                | Your expens | ses                      |
| 4.          | The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  |                                 |                    |  |             |                      |                | 4.          | \$587.00                 |
|             | If not included in line 4:   |                                 |                    |  |             |                      |                |             |                          |
|             | 4a. Real estate ta   | axes                            |                    |  |             |                      |                | 4a          |                          |
|             | 4b. Property, hor  | neowner's, or r                 | enter's            | insurance  |             |                      |                | 4b          |                          |
|             | 4c. Home mainte  | enance, repair,                 | and up             | keep expenses  |             |                      |                | 4c          | \$160.00                 |
|             | 4d. Homeowner's  | s association o                 | r condo            | minium dues  |             |                      |                | 4d.         |                          |

| Debtor 1          | Mikole Rivera  | Case number (if known) | 19-17263MDC13 |  |
|-------------------|--|------------------------|---------------|--|
|                   |  | Your e                 | expenses      |  |
| . Addit           | cional mortgage payments for your residence, such as home equity loans   | 5                      |               |  |
| . Utiliti         | es:  |                        |               |  |
| 6a. I             | Electricity, heat, natural gas   | 6a                     | \$250.00      |  |
| 6b. \             | Nater, sewer, garbage collection   | 6b                     | \$77.0        |  |
|                   | Telephone, cell phone, Internet, satellite, and cable services   | 6c                     | \$190.0       |  |
| 6d. (             | Other. Specify:  | 6d                     |               |  |
| Food              | and housekeeping supplies  | 7                      | \$500.0       |  |
| . Child           | care and children's education costs  | 8                      | \$0.0         |  |
| . Cloth           | ing, laundry, and dry cleaning   | 9                      | \$55.0        |  |
| 0. Perso          | onal care products and services  | 10                     | \$10.0        |  |
| 1. Medi           | cal and dental expenses  | 11                     | \$50.0        |  |
|                   | sportation. Include gas, maintenance, bus or train Do not include car payments.  | 12                     | \$175.0       |  |
|                   | tainment, clubs, recreation, newspapers,<br>izines, and books  | 13                     | \$0.0         |  |
| 4. Char           | table contributions and religious donations  | 14                     |               |  |
| 5. Insur<br>Do no | ance. ot include insurance deducted from your pay or included in lines 4 or 20.  |                        |               |  |
| 15a.              | Life insurance   | 15a                    |               |  |
| 15b.              | Health insurance   | 15b                    |               |  |
| 15c.              | Vehicle insurance  | 15c                    | \$247.0       |  |
| 15d.              | Other insurance. Specify:  | 15d                    |               |  |
| 6. Taxe<br>Spec   | , , ,  | 16                     |               |  |
| 7. Insta          | Ilment or lease payments:  |                        |               |  |
| 17a.              | Car payments for Vehicle 1   | 17a                    |               |  |
| 17b.              | Car payments for Vehicle 2   | 17b                    |               |  |
| 17c.              | Other. Specify:  | 17c                    |               |  |
| 17d.              | Other. Specify:  | 17d                    |               |  |
|                   | payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18                     |               |  |
| 9. Other          | r payments you make to support others who do not live with you. fy:  | 19.                    |               |  |

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| Debtor 1 |  | Mikole Rivera   | Case number (if known) | 19-17263MDC13 |  |  |  |  |
|----------|--|---|------------------------|---------------|--|--|--|--|
| 20.      |  | real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.     |                        |               |  |  |  |  |
|          | 20a.   | Mortgages on other property   | 20a                    |               |  |  |  |  |
|          | 20b.   | Real estate taxes   | 20b                    |               |  |  |  |  |
|          | 20c.   | Property, homeowner's, or renter's insurance  | 20c                    |               |  |  |  |  |
|          | 20d.   | Maintenance, repair, and upkeep expenses  | 20d                    |               |  |  |  |  |
|          | 20e.   | Homeowner's association or condominium dues   | 20e                    |               |  |  |  |  |
| 21.      | Other  | Other. Specify:   |                        |               |  |  |  |  |
| 22.      | Calcu  | Calculate your monthly expenses.  |                        |               |  |  |  |  |
|          | 22a.   | Add lines 4 through 21.   | 22a                    | \$2,301.00    |  |  |  |  |
|          | 22b.   | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.                | 22b                    |               |  |  |  |  |
|          | 22c.   | Add line 22a and 22b. The result is your monthly expenses.                                      | 22c                    | \$2,301.00    |  |  |  |  |
| 23.      | Calcu  | late your monthly net income.   |                        |               |  |  |  |  |
|          | 23a.   | Copy line 12 (your combined monthly income) from Schedule I.                                    | 23a                    | \$3,087.00    |  |  |  |  |
|          | 23b.   | Copy your monthly expenses from line 22c above.   | 23b. <b>_</b> _        | \$2,301.00    |  |  |  |  |
|          | 23c.   | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c                    | \$786.00      |  |  |  |  |
| 24.      | 24. Do you expect an increase or decrease in your expenses within the year after you file this form? |   |                        |               |  |  |  |  |
|          |  |   |                        |               |  |  |  |  |
|          | <b>V</b>   | No  |                        |               |  |  |  |  |
|          |  | Yes. Explain here: None.  |                        |               |  |  |  |  |
|          |  | 1.5   |                        |               |  |  |  |  |
|          |  |   |                        |               |  |  |  |  |